Application Data Sheet

Application Information

Secrecy Order in Parent Appl.?::

Application number::	
Filing Date::	
Application Type::	Regular
Subject Matter::	Utility
Suggested classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD disks::	
Number of copies of CDs::	
Sequence submission?::	
Computer Readable Form (C	:RF)?::
Number of copies of CRF::	
Title::	Patterned Media Having Offset Tracks
Attorney Docket Number::	04495.84704
Request for Early Publication	?:: NO
Request for Non-Publication?	?:: NO
Suggested Drawing Figure::	
Total Drawing Sheets::	5 .
Small Entity?::	NO
Latin name::	
Variety denomination name::	
Petition included?::	NO
Petition Type::	
Licensed US Govt. Agency::	
Contract or Grant Numbers::	

NO

Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Kurt

Middle Name:: Alan

Family Name:: Rubin

Name Suffix::

City of Residence:: Santa Clara

State or Province of Residence:: CA

Country of Residence:: US

Street of mailing address:: 2377 Susan Drive

City of mailing address:: Santa Clara

State or Province of mailing address:: CA

Country of mailing address:: US

Postal or Zip Code of mailing address:: 95050

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Bruce

Middle Name:: David

Family Name:: Terris

Name Suffix::

City of Residence:: Sunnyvale

State or Province of Residence:: CA

Country of Residence:: US

Street of mailing address:: 1241 Nelis Court

City of mailing address:: Sunnyvale

State or Province of mailing address:: CA

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Country of mailing address::	US
Postal or Zip Code of mailing address::	-
Postal of Zip Code of Mailing address	34001
Applicant Authority Type::	Inventor
Primary Citizenship Country::	
Status::	Full Capacity
Given Name::	
Middle Name::	
Family Name::	
Name Suffix::	
City of Residence::	
State or Province of Residence::	
Country of Residence::	
Street of mailing address::	
City of mailing address::	
State or Province of mailing address::	
Country of mailing address::	
Postal or Zip Code of mailing address::	
Correspondence Information	
Correspondence information	
Correspondence Customer Number::	22907
Representative Information	
Representative Customer Number::	22907

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
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Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::
		1	

Assignee Information

Assignee name::

International Busines Machines Corporation

Street of mailing address::

City of mailing address::

Armonk

State or Province of mailing address::

New York

Country of mailing address::

US

Postal or Zip Code of mailing address::

10504